

## ORDINANCE 2019-\_\_\_ EXHIBIT "B"

### COMMERCIAL CONSTRUCTION APPLICATION REQUIREMENTS

#### Property:

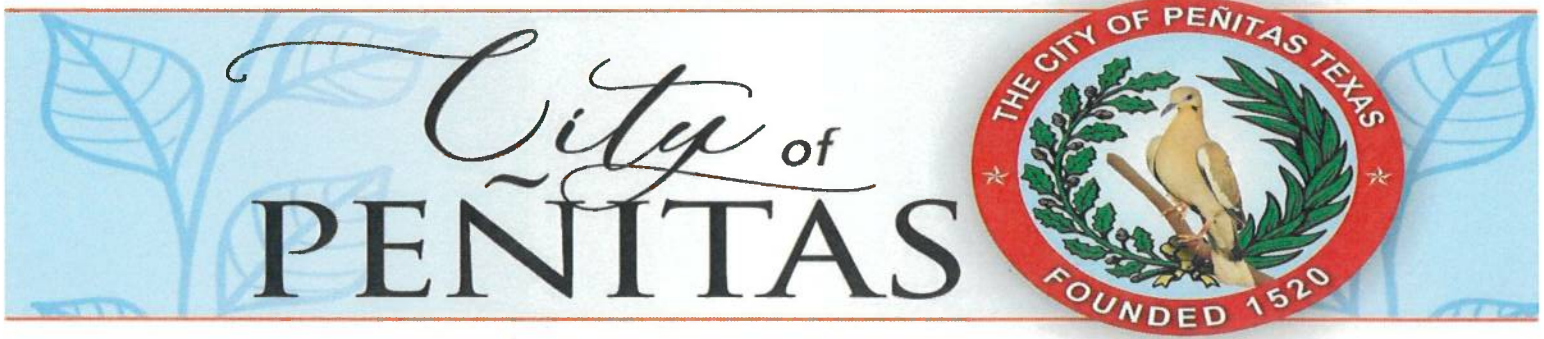
1. The Property must be platted or subdivided in accordance with current zoning ordinance.
2. Property Zoning must comply with proposed Property Use
3. A Copy of the deed of trust will be required.
4. A Curb Cut permit will be required from TXDOT from properties on State road, street, highways.
5. The property must have a run-off water detention plan included.
6. 15% Landscape required on the front of the property(to be included in plans)
7. Sanitary sewer must be available on property.

#### Construction Plans:

1. Scaled plans must include Site Plan, Electrical Plan, Floor plan, Plumbing Plan, Roof Plan, Elevation plan, Wall section, Windstorm Plan, Fire Alarm Plan(if required), Fire Sprinkler Plan(if required), and HVAC.
2. Engineered plans required for foundations exceeding 5000 sq. ft, also engineer design also required for unsupported roof span of 24 feet or more.
3. Building used for the occupancies of: Assembly, Educational, and institutional must also have structural plans designed by an engineer.
4. Windstorm must be designed by an engineer to ensure that building will withstand minimum wind load capacity of 110 mph.
5. ADA Compliance is required if cost of construction is 50,000 or more, ([www.ada.gov](http://www.ada.gov))
6. The minimum finish floor elevation is 18 inches or more from the top of the curb or center of the street.
7. Plans must indicate following information:
  - Type of Occupancy
  - Occupant Load as allowed by the Building Code
  - Capacity for Means of Egress
  - Total square footage
8. Com-Check is required (Note: Com-Check must comply with Adopted Energy Code at time of permit application)

#### Inspection Division:

1. Portable restroom required.
2. Dumpster or fenced area for construction Debris is required.
3. Setback and Floor Elevation Inspection required before concrete is poured.
4. Dumpster enclosure will be required at Final Inspection.
5. Inspections must be called to City Hall at 956-581-3345, 24 hours prior.



**CONTRACTORS/ SUB-CONTRACTOR REGISTRATION APPLICATION**

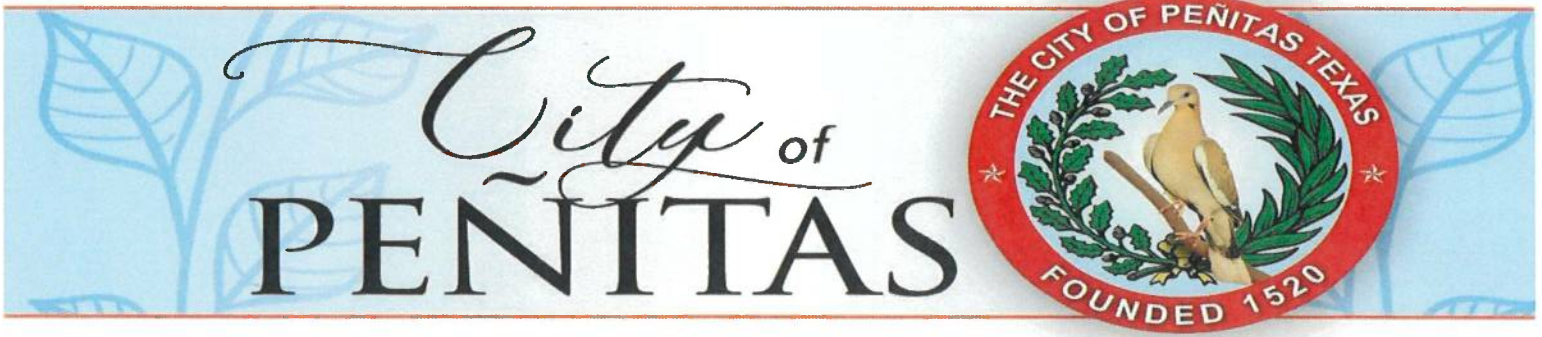
Name of Applicant: _____	
Phone: _____	
Address: _____	
Doing Business as: _____	
( ) GENERAL CONTRACTOR	REGISTRATION DATE: _____
( ) SUB- CONTRACTOR	EXPIRATION DATE: _____
( ) OTHER _____	
Registration Fee: _____	(Office Use Only)

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**( MUST PROVIDE PROOF OF GENERAL LIALBILITY OF BOND TO REGISTER)**





## Application For Commercial Building Permits

Physical Address: \_\_\_\_\_ Penitas Tx 78576

Subdivision: \_\_\_\_\_ Blk \_\_\_\_\_ Lot \_\_\_\_\_

Property Owner: \_\_\_\_\_ Phone: \_\_\_\_\_

Contractor Name: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

( ) NEW CONSTRUCTION ( ) ADDITION ( ) REMODELING ( ) FACELIFT ( ) OTHER

FOUNDATION TYPE	FOUNDATION ELEVATION	EXTERIOR WALLS MADE OF	
_____	_____	_____ IN _____	
TOTAL AREA SQ FT	NUMBER OF STORIES	INTERIOR WALLS MADE OF	
_____	_____	_____	
FRONT _____ FT	REAR _____ FT	SIDE _____ FT	SIDE _____ FT
SIGNATURE _____		DATE _____	

(INDICATE IN NORTH, SOUTH, EAST OR WEST SIDES OF PROPERTY)

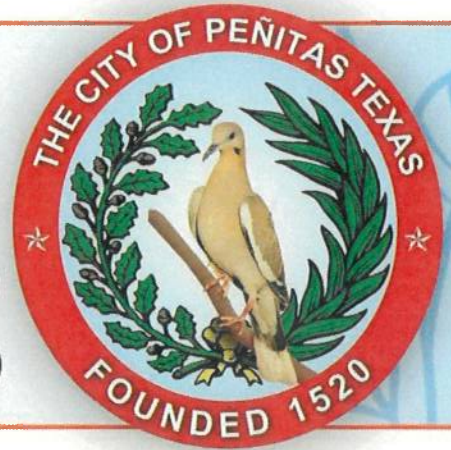
CODE COMPLIANCE: \_\_\_\_\_ DATE: \_\_\_\_\_

**APPROVE      REJECT**

IF REJECTED , REASON FOR REJECTION: \_\_\_\_\_



# City of PENITAS



## PARKING LOT PERMIT APPLICATION

PERMIT#

PHYSICAL ADDRESS:		
LOT #	BLOCK:	SUBDIVISION:
TYPE OF DRIVEWAY:		
<input type="checkbox"/> CONCRETE <input type="checkbox"/> ASPHALT <input type="checkbox"/> OTHER: _____		
SIZE OF PARKING: _____ SQ FT		
NUMBER OF PARKING SPACES: _____		HANDICAP: _____
NUMBER OF EMERGENCY EXIT DOORS: _____		
NUMBER OF FIRE EXTINGUISHERS: _____		
PERSON DOING WORK:		TELEPHONE
SIGNATURE:		DATE:

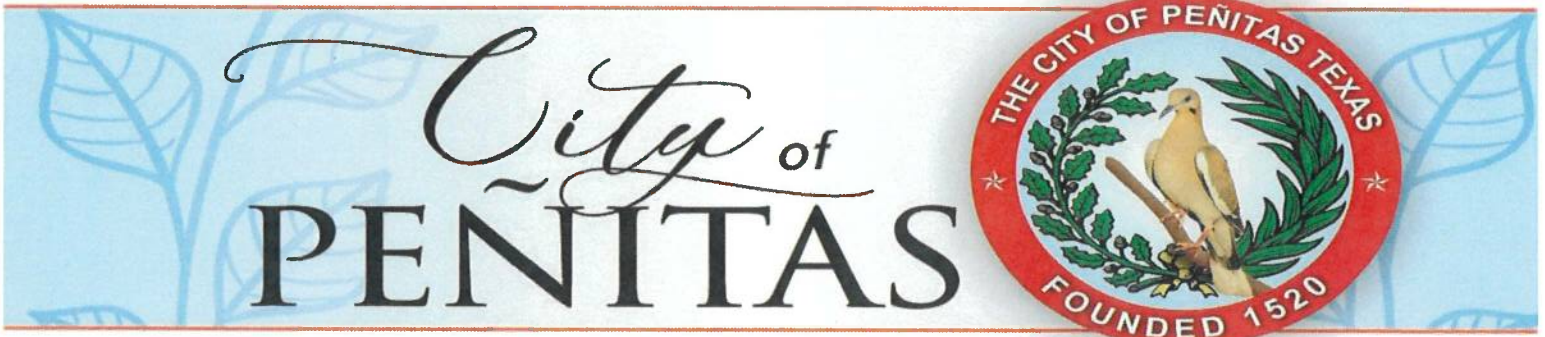
**YOU MUST CALL 24 HOURS PRIOR FOR REBAR INSPECTIONS  
PRIOR TO POURING ANY CEMENT!**

Code Compliance: \_\_\_\_\_ Date: \_\_\_\_\_

Approved      Reject

If rejected/denied, reason: \_\_\_\_\_





## APPLICATION FOR SIGN PERMIT

PHYSICAL ADDRESS: _____			
SUBDIVISION: _____		BLK: _____	LOT: _____
TOTAL SIZE OR DIMENSIONS OF THE SIGN			
LENGTH _____ FT	WIDTH _____ FT	SIGN _____	TOTAL HEIGHT _____ FT
TYPE OF SIGN OR PROJECT?			
<input type="checkbox"/> PERMANENT <input type="checkbox"/> PORTABLE <input type="checkbox"/> OFF PREMISES <input type="checkbox"/> WALL SIGN <input type="checkbox"/> OTHER _____			
_____ *AN INSPECTION IS NEEDED PRIOR TO POURING ANY CONCRETE IS SIGN GOING TO BE NEEDING ELECTRICAL? YES OR NO (IF YES, A MASTER ELECTRICAL WILL BE NEED TO OBTAIN AN ELECTRICAL PERMIT)			
OWNER OF PROPERTY: _____		ADDRESS: _____	
PHONE: (    ) _____			
CONTRACTOR: _____		ADDRESS: _____	
PHONE: (    ) _____			

Please include site plan to show proposed size, dimension, and location of sign or project.  
Allow 3-5 days for proper review.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

CODE OFFICIAL: \_\_\_\_\_ APPROVED    REJECT    DATE: \_\_\_\_\_

REASON FOR REJECTION: \_\_\_\_\_

\_\_\_\_\_



# City of PENITAS



## ELECTRICAL PERMIT APPLICATION

PHYSICAL ADDRESS: _____		
SUBDIVISION: _____		LOT: _____
DESCRIPTION OF WORK:		
SERVICE___	SERVICE AMOUNT (AMPS)_____	SERVICE FEE AMOUNT_____
( ) T-POLE_____	( ) CHANGE/UPGRADE/RELOCATE_____	( ) WORKING CLEARANCE_____
( ) ADDED CIRCUITS_____	( ) RE- INSPECTION_____	PERMIT/ INSPECTION_____
TOTAL: _____		
IF OTHER PLEASE DESCRIBE _____		
MASTER ELECTRICAL NAME:	ADDRESS:	TELEPHONE
_____	_____	_____
BUILDING CLASSIFICATION:	RESIDENTIAL ( )	OR COMMERCIAL ( )
SIGNATURE: _____	DATE: _____	

**MASTER LICENSE AND GENERAL LIABILITY INSURANCE (\$300,000) ARE REQUIRED FOR AN ELECTRICAL PERMIT**

CODE COMPLIANCE: \_\_\_\_\_ DATE: \_\_\_\_\_

APPROVE                      REJECT

IF REJECTED, REASON FOR REJECTION: \_\_\_\_\_



# City of PENITAS



## PLUMBING PERMIT APPLICATION

PERMIT# \_\_\_\_\_

**PHYSICAL ADDRESS WHERE WORK IS TO BE DONE:**

**NAME OF SUBDIVISION:**

**LOT #**

**Fixture/drain/ appliance= Number of fixtures/drain/ Appliance = \_\_\_\_\_**

**Water piping**

**Gas Piping**

**Sewer drain**

**Lawn Sprinkler system**

**Excavation permit**

**Re- Inspection**

**PROPERTY OWNER:**

**TELEPHONE:**

**MASTER PLUMBER NAME:**

**TELEPHONE:**

**PROPERTY CLASSIFICATION:**

**RESIDENTIAL**

**COMMERCIAL**

**SIGNATURE:**

**DATE:**

**\* MASTER LICENSE AND GENERAL LIABILITY INSURANCE ARE REQUIRED WHEN  
APPLYING FOR A PLUMBING PERMIT WITH THE CITY OF PENITAS.**

Code Compliance: \_\_\_\_\_ Approved Denied Date: \_\_\_\_\_



# City of PEÑITAS



## MECHANICAL PERMIT APPLICATION

<b>PHYSICAL ADDRESS WHERE WORK WILL BE DONE:</b>		
<b>LOT #</b>	<b>NAME OF SUBDIVISION:</b>	
RESIDENTIAL ____ OR COMMERCIAL ____		
<input type="checkbox"/> Residential A/C area = _____ ( ) Duct work <input type="checkbox"/> Commercial A/C area (sq. ft) = _____ Number of Units <input type="checkbox"/> Industrial walk – in cooler (sq. ft) = _____ Total Tons <input type="checkbox"/> Store walk- in cooler (sq ft) = _____		
<b>TECHNICIAN/CONTRACTOR NAME:</b>	<b>LIC#</b>	<b>TELEPHONE:</b>
_____	_____	_____
<b>COMPANY'S NAME:</b>	<b>ADDRESS:</b>	<b>TELEPHONE:</b>
_____	_____	_____
<b>SIGNATURE:</b>	<b>DATE:</b>	
_____	_____	

**Approve Or Denied**

**Building Official:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**IF REJECTED REASON:** \_\_\_\_\_

